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CONFIRMATION NO. 6397

<b>SERIAL NUMBER</b> 10/540,306	<b>FILING OR 371(c) DATE</b> 06/20/2005 <b>RULE</b>	<b>CLASS</b> 623	<b>GROUP ART UNIT</b> 3774	<b>ATTORNEY DOCKET NO.</b> 084329-000000US
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## \*\* CONTINUING DATA \*\*\*\*\*

This application is a 371 of PCT/AU03/01699 12/19/2003

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

AUSTRALIA 2002953440 12/19/2002

\*\* SMALL ENTITY \*\*

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	<b>STATE OR COUNTRY</b> AUSTRALIA	<b>SHEETS DRAWING</b> 11	<b>TOTAL CLAIMS</b> 29	<b>INDEPENDENT CLAIMS</b> 2
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials		

## ADDRESS

20350

## TITLE

METHOD OF TREATING A STIFFENED BLOOD VESSEL

<b>FILING FEE RECEIVED</b> 1650	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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